

RCSP Volunteer Range Safety Officer



Thank you for your interest in becoming a Volunteer Range Safety Officer (VRSO) at the Rabbit Creek Shooting Park (RCSP). RCSP provides hunters and recreational shooters of all skill levels with ranges for handgun, rifle, rimfire, archery, and non-toxic shotgun clay target shooting. The top priority is to provide a safe, enjoyable shooting and educational facility for the residents and visitors of Alaska.

RCSP serves more than 30,000 customers per year, utilizing both staff and VRSO's to maintain a safe and enjoyable range. VRSOs are people with firearm experience, specialized training, and good people skills. The primary responsibility of a VRSO is to observe customer behavior and ensure safe handling and shooting of firearms, in compliance with RCSP range rules. VRSOs are expected to interact with customers in a calm, reasonable, and professional manner. VRSOs often answer questions regarding basic use of firearms, safety procedures, and general firearms information. Although many VRSOs are also firearms instructors of varying knowledge and experience, this is not a requirement. We have VRSOs who actively help out on various days, times, and on different ranges throughout RCSP, and are always looking for additional people who would like to serve the community as a VRSO.

The following items are required to become a VRSO:

1. Application form

2. Request for Criminal Justice Information (Interested Person Report and Fish & Wildlife Violation Report)

Complete the Request for Criminal Justice Information form and mail it to the address on the form with payment. Send the TWO reports and receipt for the \$20.00 fee with your HIT Program application forms. Or you can visit the Alaska State Troopers office to obtain the reports. Be prepared to present two forms of identification (an Alaska Driver's License or Alaska ID card and another form of identification that shows your signature). A \$20.00 fee will be charged by the Alaska State Troopers office for these printouts. Payment for the background check must be either cash or a check written from a local bank.

3. Firearm Possession form

4. Photocopy of NRA Range Safety Officer (RSO) certification card

If you haven't completed this training, you will receive certification as part of your volunteer training.

Once we receive copies of the information listed above, we will setup times to complete the following training to become a VRSO:

1. Range Policy Training

You will spend 1-2 hours with the Range Manager going through the SOP, expectations of a VRSO, and completing a walk-thru of the range.

2. Range Time with VRSO

You will spend 1-2 hours with a veteran VRSO learning about each of the ranges and a VRSOs role.

3. NRA RSO Certification (if not completed yet)

RCSP Volunteer Range Safety Officer Application

Name			Date of Birth _	SS#
(Last)	(First)	(Middle)		(mm / dd / yyyy)
Address			City	State & Zip
Telephone				_Occupation
(Home	?)	(Work)	(Cell)	
Email				
Use a separate she		•	iave (ie. NRA RS	O, concealed carry, hunter education)
		way have with	, firoarm safaty	teaching, and public speaking. Use a
Briefly describe a separate sheet if n	-	you have with		9/ ··· · · · · · · · · · · · · · · · · ·
separate sheet if n	ecessary.			rships pertinent to being a VRSO
List any qualificat If accepted as an R accordance with th felony, or crime of history background of perjury will auto	ions, experience CSP Volunteer if the policies and standing turpitual to obtained from the standing result for reject my app	Range Safety Of andards set fort de. I understand the Alaska State in my disqualification or term	ficer, I agree to coth in the SOP. I center I must furnish the Troopers. Any management of the troopers of the troopers.	

Please submit all application items to:

dfg.dwc.rcsp@alaska.gov

or

ADF&G-RCSP 333 Raspberry Road Anchorage, AK 99518

For additional information or questions, contact the Range Manager at (907) 345-7831.

VOLUNTEER QUALIFICATION INQUIRY FIREARM POSSESSION

The activities in which you have volunteered to participate require or permit you to possess or use ammunition or a firearm. Therefore, before you may participate in this Fish and Game project, you are required to complete this Qualification Inquiry - Firearm Possession form and deliver it to your project supervisor to be attached to your Volunteer Agreement.

In completing this form, you are advised of the following:

- a) You are directed to complete this form. Failure to reply fully and truthfully will result in your restriction from the project.
- b) Neither your answers nor any evidence gained by reason of your answers can be used against you in any criminal prosecution for a violation of Title 18, United States Code, Section 922(g)(9). However, the answers you furnish and any information or evidence resulting therefrom may be used against you in a prosecution for knowingly and willfully providing false statements or information.

1.	Have you ever been convicted of a misdem Sec. 921(a)(33)(A)?	eanor crime of domestic violence within the meaning of 18 U.S.C.,
	Yes	No No
	however, sign this form certifying that it is	do not need to provide the information in item 2. You must, true and that you will report any future conviction of a within the meaning of 18 U.S.C., Sec. 921(a)(33)(A), and deliver it
2.		s," provide the following information with respect to the om any volunteer activities until a determination on your volunteer
	Court/Jurisdiction	
	Docket/Case Number	
	Statute	
	Charge	
	Date Sentenced	
un the lav mi	derstand that false, misleading, or incomplete e project, and is also punishable pursuant to fe w as unsworn falsification (AS 11.56.210). I sdemeanor crime of domestic violence within	d by me is true, correct, complete, and made in good faith. I e information provided herein may be grounds for removal from ederal law, including 18 U.S.C., Sec. 1001, and under Alaska State agree that I will immediately report any future conviction of a n the meaning of 18 U.S.C., Sec. 921(a)(33)(A) to my project such a report is grounds for removal from the project.
Na	tme (Print or type):	
	gnature:	Date:
	parent of minor volunteer)	votion Statewide Decompose Hunton Information and Tagining Decompose
v O	numeer for ADF&G Division of whathe Conserv	vation, Statewide Programs, Hunter Information and Training Program

STATE OF ALASKA DEPARTMENT OF PUBLIC SAFETY REQUEST FOR CRIMINAL JUSTICE INFORMATION

From the Alaska Criminal History Record Repository

Original forms must be submitted to:

Criminal Records and Identification Bureau 5700 E. Tudor Road, Anchorage, AK 99507 Telephone: (907) 269-5767 Fax: (907) 269-5091

Include fee: \$20 single copy, \$5 each additional copy Check or money order must be made payable to 'State of Alaska'

Type of information being requested (from the record subject): (Choose ONE)				
1. Criminal Justice Information available only to the SUBJECT				
 This report includes all criminal charges and dispositions, including any sealed record. If the record subject has a sealed record this box MUST be checked 				
a.o rocord dabject ride a dealed record the box moor be encoded.				
Criminal Justice Information available to ANY PERSON for ANY PURPOSE				
 This report includes current/open criminal charges and charges that resulted in conviction, excluding sealed records. 				
2 Criminal Justice Information evailable to an INTEDESTED DEDSON				
 3. Criminal Justice Information available to an INTERESTED PERSON This report includes all criminal charges and dispositions, excluding sealed records 				
*Also requesting my Fish & Wildlife Violations report				
A check or money order payable to the State of Alaska in the amount of \$20 must accompany this request. Additional copies, if				
requested at the time of this request, may be obtained for an additional \$5 per copy. State agencies with a Reimbursable Services				
Agreement (RSA) in place may fax the appropriate forms. All other requests must be submitted via U.S. Postal Service or in person.				
Subject Name:				
Maiden/Alias name(s):				
Mailing Address:				
Mailing Address				
City/State/Zip:				
Alaska Drivers License #:				
Date of Birth: Sex:				
Date of Diffit SexIvidieFetfidie Soc Sec Ivo				
Telephone: Msg:				
MANUNG ADDRESS TO SEND DEDORT				
MAILING ADDRESS TO SEND REPORT:				
Name:				
Title:				
Mailing Address:				
City/State/Zip:				
*Please send a receipt along with the reports				
☐ If you would like the record faxed to you, provide a Fax Number:				
Unsworn Falsification Statement (Your request will not be processed if you do not sign this statement.)				
I certify under penalty of unsworn falsification (AS 11.56.210) that the information I am supplying on and with this form is true and correct.				
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Record Subject's Signature Date				
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Request for Criminal Justice Information Page 2

Criminal Records and Iden	ntification Bureau Use Only
Fee Payment Type	Report Sent to Subject
Fee Waiver/Authorization	Report Sent to Requester
OCA Number	R&I Staff initials

Authority:

AS 11.56.210 - Unsworn Falsification

AS 12.62.160 - Release and Use of Criminal Justice Information; fees

AS 12.62.900 - Definitions

13 AAC 68 Article 4 – Dissemination of Criminal Justice Information

13 AAC 68.905 - Definitions

DPS Form 11/15/03

Revised 2/24/04

Revised 4/20/04

Revised 11/15/04

Revised 1/13/05

Revised 6/13/05